

Fill in this	information to identify your case:		heck one box only as o 22A-1Supp:	irected in this form and in Form				
Debtor 1	Jonathan M. Arena							
Debtor 2	line)			umption of abuse				
(Spouse, if fi	ates Bankruptcy Court for the: <u>Eastern Dis</u>	trict of Pennsylvania	applies will be r	to determine if a presumption of abus nade under <i>Chapter 7 Means Test</i> icial Form 122A-2).	е			
Case nun	nber			does not apply now because of a service but it could apply later.				
			☐ Check if this is a	an amended filing	_			
<u>Officia</u>	al Form 122A - 1							
Chapt	ter 7 Statement of Your	Current Monthly Inc	come	12/	19			
a separate number (if	olete and accurate as possible. If two married posset to this form. Include the line number to we known). If you believe that you are exempted frevice, complete and file Statement of Exemption Calculate Your Current Monthly Income	rhich the additional information applie om a presumption of abuse because y n from Presumption of Abuse Under §	s. On the top of any addi ou do not have primarily	tional pages, write your name and case consumer debts or because of qualifyi				
1. Wha	It is your marital and filing status? Check	one only.			\neg			
	Not married. Fill out Column A, lines 2-11.							
	flarried and your spouse is filing with you		es 2-11.					
	larried and your spouse is NOT filing with] Living in the same household and are no		Columns A and B lines	2 11				
	_	• • •	•		er			
_	Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C § 707(b)(7)(B).							
Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months,								
add the	income for all 6 months and divide the total by 6. F	ill in the result. Do not include any incom	e amount more than once.	For example, if both spouses own the san				
rental pi	roperty, put the income from that property in one co	olumn only. If you have nothing to report t						
			Column A Debtor 1	Column B Debtor 2 or				
				non-filing spouse				
	r gross wages, salary, tips, bonuses, over oll deductions).	rtime, and commissions (before al	\$ 0.00	\$				
	nony and maintenance payments. Do not in		·					
	ımn B is filled in.		\$	\$				
of y of from and	imounts from any source which are regul- ou or your dependents, including child su an unmarried partner, members of your hou roommates. Include regular contributions fro I in. Do not include payments you listed on lin	ipport. Include regular contributions isehold, your dependents, parents, m a spouse only if Column B is not	\$0.00_	\$				
5. Net	income from operating a business, profes	Í						
_		Debtor 1						
	ss receipts (before all deductions)	\$ 3,869.00						
	nary and necessary operating expenses	-\$						
	monthly income from a business, ession, or farm	Copy \$3,869.00 here ->	>\$ 3,869.00	\$				
6. Net	income from rental and other real propert							
		Debtor 1						
	ss receipts (before all deductions)	\$ 0.00						
	nary and necessary operating expenses	-\$ <u>0.00</u>						
Net	monthly income from rental or other real prop	perty \$0.00 Copy here -		\$				
7. Inte	rest, dividends, and royalties		\$	\$	J			

Official Form 122A-1

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Document Page 2 of 3 Jonathan M. Arena Case number (if known) Column A Column R Debtor 2 or Debtor 1 non-filing spouse 8. Unemployment compensation 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you\$ For your spouse.....\$ 9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled if retired under any provision of title 10 other than chapter 61 of that title. 0.00 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act; payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below... 0.00 Total amounts from separate pages, if any. 0.00 11. Calculate your total current monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B. 3,869.00 3,869.00 Total current monthly Part 2: **Determine Whether the Means Test Applies to You** 12. Calculate your current monthly income for the year. Follow these steps: 3,869.00 **x** 12 Multiply by 12 (the number of months in a year) 12b. The result is your annual income for this part of the form 12b 46.428.00 13. Calculate the median family income that applies to you. Follow these steps: PA Fill in the state in which you live. Fill in the number of people in your household. 65,737.00 Fill in the median family income for your state and size of household. 13. To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 14. How do the lines compare? Go to Part 3. Do NOT fill out or file Official Form 122A-2. Line 12b is more than line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 122A-2. 14b. Go to Part 3 and fill out Form 122A-2. Part 3: Sign Below By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct. X /s/ Jonathan M. Arena

Jonathan M. ArenaSignature of Debtor 1

Signature of Debtor 1

Date **January 17, 2025**

Debtor 1	Jonathan M. Arena	Case number (if known)	
	MM / DD / YYYY		
	ou checked line 14a, do NOT fill out or file Form 122A-2.		
	If you checked line 14b, fill out Form 122A-2 and file it with this form.		